

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT	6207	3/21/00
O.I.P.E. CLASSIFIER			7-1-00
FORMALITY REVIEW	RS	61730	6-8-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/9/03
2	✓	✓	3/9/03
3	✓	✓	3/9/03
4	✓	✓	3/9/03
5	✓	✓	3/9/03
6	✓	✓	3/9/03
7	✓	✓	3/9/03
8	✓	✓	3/9/03
9	✓	✓	3/9/03
10	✓	✓	3/9/03
11	✓	✓	3/9/03
12	✓	✓	3/9/03
13	✓	✓	3/9/03
14	✓	✓	3/9/03
15	✓	✓	3/9/03
16	✓	✓	3/9/03
17	✓	✓	3/9/03
18	✓	✓	3/9/03
19	✓	✓	3/9/03
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25	✓	✓	3/9/03
26	✓	✓	3/9/03
27	✓	✓	3/9/03
28	✓	✓	3/9/03
29	✓	✓	3/9/03
30	✓	✓	3/9/03
31	✓	✓	3/9/03
32	✓	✓	3/9/03
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45	✓	✓	3/9/03
46	✓	✓	3/9/03
47	✓	✓	3/9/03
48	✓	✓	3/9/03
49	✓	✓	3/9/03
50	✓	✓	3/9/03

Claim	Final	Original	Date
51	✓	✓	3/9/03
52	✓	✓	3/9/03
53	✓	✓	3/9/03
54	✓	✓	3/9/03
55	✓	✓	3/9/03
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57	✓	✓	3/9/03
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74	✓	✓	3/9/03
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76	✓	✓	3/9/03
77	✓	✓	3/9/03
78	✓	✓	3/9/03
79	✓	✓	3/9/03
80	✓	✓	3/9/03
81	✓	✓	3/9/03
82	✓	✓	3/9/03
83	✓	✓	3/9/03
84	✓	✓	3/9/03
85	✓	✓	3/9/03
86	✓	✓	3/9/03
87	✓	✓	3/9/03
88	✓	✓	3/9/03
89	✓	✓	3/9/03
90	✓	✓	3/9/03
91	✓	✓	3/9/03
92	✓	✓	3/9/03
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96	✓	✓	3/9/03
97	✓	✓	3/9/03
98	✓	✓	3/9/03
99	✓	✓	3/9/03
100	✓	✓	3/9/03

Claim	Final	Original	Date
101			
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If more than 150 claims or 10 actions  
 staple additional sheet here

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Best Available Copy